

BEHAVIORAL HEALTH

Allan Rawland

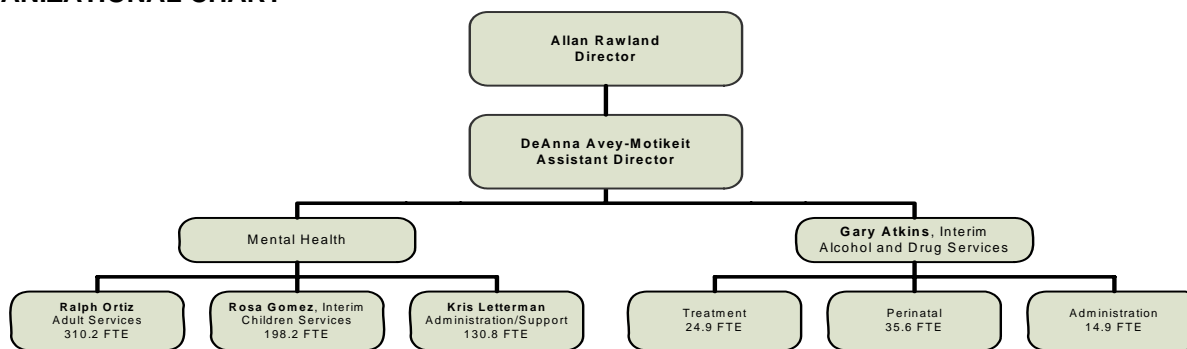
MISSION STATEMENT

The Department of Behavioral Health will help individuals living with the problems of mental illness and substance abuse find solutions to challenges they face so that they may function well within their families and the community. The Department of Behavioral Health staff will be sensitive to and respectful of all clients, their families, culture and languages. The Department of Behavioral Health will use the taxpayers' money wisely to meet its goals while following all governmental guidelines and requirements. The Department of Behavioral Health will provide a pleasant workplace for its staff members so that they may be creative and effective in their jobs. The Department of Behavioral Health will provide a pleasant environment for clients in which to receive services.

STRATEGIC GOALS

1. Increase access to behavioral health services for individuals that are unserved or who are receiving a limited level of services.
2. Increase "customer service" education and cultural competency training for all county and contract staff that promotes the mission of the county and the department.
3. Increase access to community behavioral health services for adolescents with mental illness who are involved in the juvenile justice system.

ORGANIZATIONAL CHART



SUMMARY OF BUDGET UNITS

	2006-07				
	Appropriation	Revenue	Local Cost	Fund Balance	Staffing
Behavioral Health	164,822,242	162,979,489	1,842,753		644.2
Alcohol and Drug Services	19,782,871	19,633,413	149,458		76.4
Mental Health Services Act	28,786,612	27,900,880		885,732	-
Driving Under the Influence Programs	312,689	90,000		222,689	-
State Block Grant Carryover Program	5,268,065	1,895,401		3,372,664	-
Court Alcohol and Drug Program	1,127,538	415,000		712,538	-
Proposition 36	6,202,680	6,099,773		102,907	-
TOTAL	226,302,697	219,013,956	1,992,211	5,296,530	720.6

Detailed information for each budget unit is provided, along with a description of services provided, budget unit history and applicable performance measures.



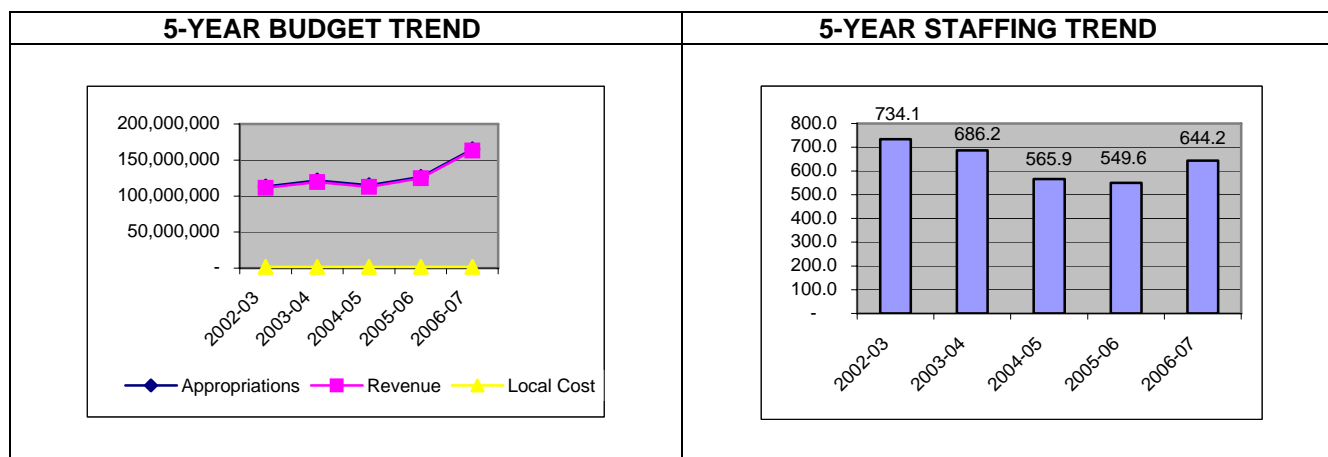
Behavioral Health

DESCRIPTION OF MAJOR SERVICES

The Department of Behavioral Health (DBH) is responsible for providing mental health services to county residents who are either unable to afford treatment or do not live in proximity to private services. Treatment is provided to all age groups, with primary emphasis placed on treating seriously mentally ill adults and seriously disordered children and their families. Services are delivered throughout the county via a network of department-operated clinics, community based contract providers (residential and psychiatric skilled nursing facilities and acute hospitals), public schools, and other community-based settings. Services include: information and referrals, community outreach, client self-help and support groups, a variety of children's programs, mentally ill homeless program, employment services, case management, crisis and transitional residential assistance, augmented board and care placements, conservatorship services, supportive housing services, and client transportation assistance. The department also operates as a training setting by administering various internship programs and offering continuing education for licensed department and contractor staff.

The Mental Health Services Act of 2005 (MHSA), passed by the California voters in November 2004, has given San Bernardino County and DBH the opportunity to build a "system of care and treatment" that will efficiently and effectively serve all clients, especially to ensure access to behavioral health services for populations and individuals that are unserved or who are receiving a limited level of services from the present programs due to the lack of adequate funding and/or the various restrictions on the use of those funds. The particular populations include individuals who are homeless and/or incarcerated in jails or juvenile halls, who are in out-of-home and out-of-county placements, isolated in their homes, failing in school, or in other institutional care facilities. These populations also include individuals and families who are from racial and ethnic communities who are not adequately served by the behavioral health system.

BUDGET HISTORY



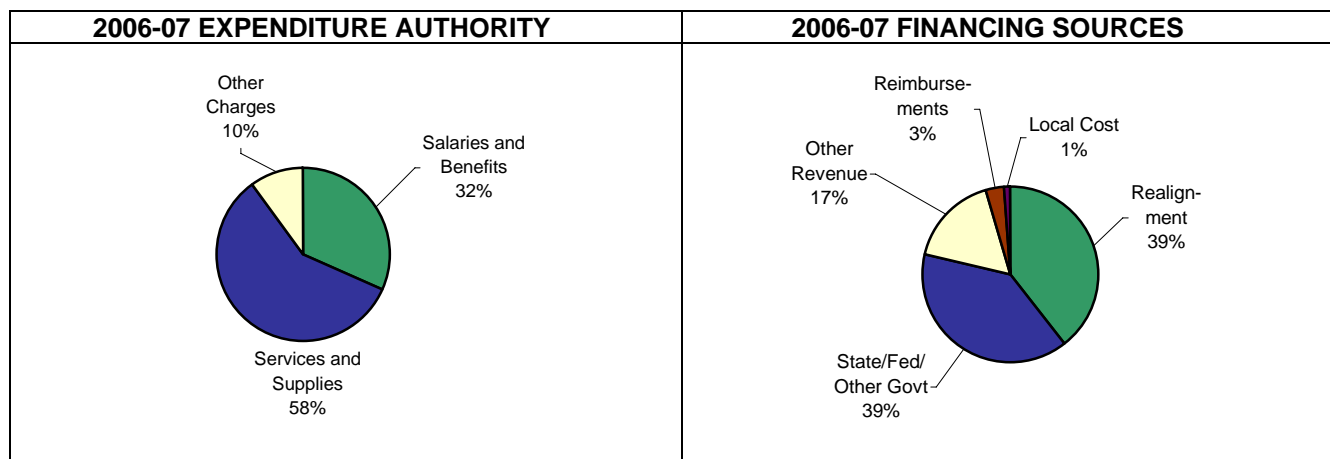
PERFORMANCE HISTORY

	2002-03 Actual	2003-04 Actual	2004-05 Actual	2005-06 Modified Budget	2005-06 Actual
Appropriation	117,341,111	117,902,648	111,570,782	126,375,041	119,212,075
Departmental Revenue	115,498,359	116,059,895	109,020,466	124,532,288	117,369,322
Local Cost	1,842,752	1,842,753	2,550,316	1,842,753	1,842,753
Budgeted Staffing				549.6	

Expenditures for 2005-06 are less than modified budget primarily due to 1) salary savings resulting from staff turnover and delays in filling positions, 2) contracted services less than estimated, and 3) unexpended budget due to delays in selecting and implementing a new IT system.



ANALYSIS OF FINAL BUDGET



GROUP: Administrative/Executive
DEPARTMENT: Behavioral Health
FUND: General

BUDGET UNIT: AAA MLH
FUNCTION: Health and Sanitation
ACTIVITY: Hospital Care

	2002-03 Actual	2003-04 Actual	2004-05 Actual	2005-06 Actual	2005-06 Final Budget	2006-07 Final Budget	Change From 2005-06 Final Budget
Appropriation							
Salaries and Benefits	41,805,578	42,328,702	38,684,994	41,926,392	45,162,142	54,051,968	8,889,826
Services and Supplies	64,896,741	62,786,823	60,247,931	66,401,328	70,038,970	98,865,273	28,826,303
Central Computer	550,342	407,902	523,431	520,717	480,343	640,543	160,200
Other Charges	4,301,849	5,148,542	4,799,719	3,806,988	4,169,169	4,282,033	112,864
Equipment	-	-	-	66,172	60,000	80,800	20,800
Vehicles	-	-	-	-	-	590,000	590,000
Transfers	1,838,745	4,511,462	4,609,161	4,940,050	4,872,460	5,619,797	747,337
Total Exp Authority	113,393,255	115,183,431	108,865,236	117,661,647	124,783,084	164,130,414	39,347,330
Reimbursements	(4,091,776)	(3,998,290)	(4,477,326)	(5,190,283)	(5,008,596)	(5,668,925)	(660,329)
Total Appropriation	109,301,479	111,185,141	104,387,910	112,471,364	119,774,488	158,461,489	38,687,001
Operating Transfers Out	8,039,632	6,717,507	7,182,872	6,740,711	6,592,753	6,360,753	(232,000)
Total Requirements	117,341,111	117,902,648	111,570,782	119,212,075	126,367,241	164,822,242	38,455,001
Departmental Revenue							
Realignment	65,503,740	62,416,095	41,823,063	52,080,249	62,490,106	67,252,313	4,762,207
State, Fed or Gov't Aid	48,156,692	52,669,737	65,324,545	63,544,174	60,396,954	66,494,882	6,097,928
Current Services	294,391	306,141	200,403	237,453	262,870	190,156	(72,714)
Other Revenue	1,543,536	645,202	1,645,422	568,819	1,374,558	1,141,258	(233,300)
Other Financing Sources	-	22,720	27,033	-	-	-	-
Total Revenue	115,498,359	116,059,895	109,020,466	116,430,695	124,524,488	135,078,609	10,554,121
Operating Transfers In	-	-	-	938,627	-	27,900,880	27,900,880
Total Financing Sources	115,498,359	116,059,895	109,020,466	117,369,322	124,524,488	162,979,489	38,455,001
Local Cost	1,842,752	1,842,753	2,550,316	1,842,753	1,842,753	1,842,753	-
Budgeted Staffing					549.6	644.2	94.6

In 2006-07, the department will incur increased costs to maintain current services, such as negotiated labor agreements, retirement, risk management, central computer and inflationary services and supplies purchases; and will incur decreased costs in worker's compensation. These costs are reflected in the Change From 2005-06 Final Budget column, along with changes related to Board approved mid-year adjustments and department recommendations.

The budget includes a \$30.6 million increase to implement Mental Health Service Act (MHSA) funded programs. New and expanded services include a child/family support system, children's crisis response teams, one-stop integrated service centers for transitional-age youth, a consumer-operated peer-support and clubhouse expansion program, a forensic integrated mental health services program, and an assertive community treatment team for high users of hospital and jail services. Ongoing costs total \$20.1 million, and include salaries & benefits in the amount of \$5.2 million for 76 new positions, \$2.3 million in services and supplies, and \$12.6 million in contracted services. One-time costs total \$10.5 million and include IT upgrades, training, furniture and equipment, vehicles, tenant improvements to structures, and housing assistance start-up costs.



The budget includes an additional increase in staffing in the amount of \$1.9 million. Some of the new staffing will provide increased mental health services to the County's Juvenile Hall population. These costs account for salaries and benefits in the amount of \$2.2 million for 24 new positions. Staffing is also included to increase program and administrative support staff, not associated with the Mental Health Services Act, to improve service delivery, monitor contracts and programs more efficiently, enhance the audit division, and restore Alcohol and Drug support staff levels to maximize the use of funding and avoid audit disallowances. These costs account for salaries and benefits in the amount of \$1.1 million for a net of 28 new positions. The cost increase associated with the addition of new positions is offset by \$1.4 million in budgeted salary savings anticipated due to staff turnover.

The budget also includes a net increase in services and supplies in the amount of \$3 million. Of the increase, \$1.3 million is associated with the increased mental health services to the County's Juvenile Hall population; \$1.5 million consists of one-time costs associated with the Juvenile Hall population, moving administrative staff to other facilities, and beginning implementation costs for a new IT system. The budget also includes a net \$250,000 increase in contracted services due to the anticipated opening of a new Crisis Stabilization Unit/Psychiatric Health (CSU/PHF) Facility in the high desert region. The CSU/PHF is expected to provide a lower cost alternative to hospital placements by significantly decreasing the number of clients currently receiving services at area hospitals.

The budget reflects a decrease of \$255,000 in State Hospital costs due to the department's commitment to reduce higher levels of care to clients, while providing them with lower-level intensive alternatives. In keeping with this objective, Interim Assistance costs are expected to increase by approximately \$354,000. These costs are an essential component of successfully transitioning clients to Board and Care facilities, thus reducing costs associated with higher level of care facilities. This is consistent with the department performance measures.

Mental Health programs are funded with a combination of federal, state, and realignment dollars. The budget contains an increase in realignment usage of \$4.7 million. The increase is needed to fund the increases discussed above (with the exception of MHSA programs, which are 100% funded with State funds). MHSA funds cannot be used to fund existing costs in programs and services, but may only be used for new and expanded programs.

The need for additional realignment to fund ongoing program costs is growing. The department is actively exploring and implementing strategies to reduce its ongoing need for Realignment while maximizing federal and state revenues in future years. Some of these strategies include reducing usage of state and other hospital admissions by providing more wraparound services, crisis stabilization services, case management, triage, and increasing program and contractor monitoring to ensure state and federal billing for services is maximized.

FINAL BUDGET CHANGES

There are no final budget changes associated with this budget unit.

PERFORMANCE MEASURES		
Description of Performance Measure	2005-06 Actual	2006-07 Projected
Decrease number of institutional admissions (currently 7,756).	N/A	10%
Decrease number of institutional bed days (currently 63,203).	N/A	10%
% of employees completing training program.	N/A	25%
% of transitioning Juvenile Hall youth in wraparound services.	N/A	25%

